

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 34130
Name: MANNS' ATP, INC.
Address 1: 7865 Northwest 80th Street
Address 2: _____
City: Potwin State: KS Zip: 67123 + _____
Contact Person: Edward Mann
Phone: (620) 752-3200
CONTRACTOR: License # 33217
Name: Three Rivers Exploration, LLC
Wellsite Geologist: none
Purchaser: _____
Designate Type of Completion:
 New Well _____ Re-Entry _____ Workover
 Oil _____ SWD _____ SIOW
_____ Gas _____ ENHR _____ SIGW
_____ CM (Coal Bed Methane) _____ Temp. Abd.
_____ Dry _____ Other _____
(Core, WSW, Expl., Cathodic, etc.)

If Workover/Re-entry: Old Well Info as follows:
Operator: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
_____ Deepening _____ Re-perf. _____ Conv. to Enhr. _____ Conv. to SWD
_____ Plug Back: _____ Plug Back Total Depth
_____ Commingled _____ Docket No.: _____
_____ Dual Completion _____ Docket No.: _____
_____ Other (SWD or Enhr.?) _____ Docket No.: _____
December 4, 2008 December 10, 2008 January 7, 2009
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 015-23810-00-00
Spot Description: _____
SW NE NW SW Sec. 26 Twp. 24 S. R. 4 East West
2,198 Feet from North / South Line of Section
4,575 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Butler
Lease Name: Manns Well #: 3
Field Name: Plum Grove South
Producing Formation: Mississippian
Elevation: Ground: 1,396 ft. Kelly Bushing: 1,402 ft.
Total Depth: 2,675 ft. Plug Back Total Depth: 2,660 ft.
Amount of Surface Pipe Set and Cemented at: 200 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 2,670
feet depth to: surface w/ 210 ^{sx cmf}

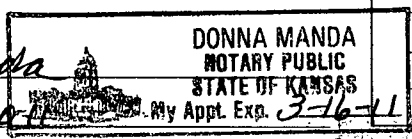
Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 600 ppm Fluid volume: 1,400 bbls
Dewatering method used: Let air dry
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

AT+1-DG-4/2/09

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: *Donna Manda*
Title: Agent for Manns' ATP, Inc. Date: February 5, 2009
Subscribed and sworn to before me this 0th day of February, 2009.
Notary Public: *Donna Manda*
Date Commission Expires: March 16, 2011



KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
KANSAS CORPORATION COMMISSION
FEB 06 2009

Operator Name: MANNS' ATP, INC. Lease Name: Manns Well #: 3
 Sec. 26 Twp. 24 S. R. 4 East West County: Butler

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Dual Induction Log Dual Compensated - Porosity Long	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name _____ Top _____ Datum _____ See attached log
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CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	12-1/4"	8-5/8" - new	24 lb.	200'	Class A	105	3%Cal, 2% Gel
Production	7-7/8"	4-1/2" - Used	10.5 lb.	2,670'	Thick set slurry	210	Kol-seal 5#-1050#

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4	2,575' - 2,579'	Acid - 500 bbl. - 15%	

TUBING RECORD: Size: <u>2-3/8"</u> Set At: <u>2,645'</u> Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. <u>January 16, 1009</u>		Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
Estimated Production Per 24 Hours	Oil Bbbs. <u>30 bbbs.</u>	Gas Mcf _____ Water Bbbs. <u>0</u> Gas-Oil Ratio _____ Gravity <u>40.5</u>

DISPOSITION OF GAS: <input checked="" type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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CONSOLIDATED
Oil Well Services, LLC



ENTERED

TICKET NUMBER 20696
LOCATION EUREKA
FOREMAN Kevin McCoy

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-10-08	5500	MANNIS #3				Butler
CUSTOMER MANNIS AIP INC.			TRUCK # DRIVER 445 Justin 543 Dave 436 Chris 437 Jim			
MAILING ADDRESS 7865 NW 80 th						
CITY Potwin		STATE KS				
ZIP CODE 67123						
Three Rivers Explor.						

JOB TYPE Longstring HOLE SIZE 7 7/8 HOLE DEPTH 2675' G.L. CASING SIZE & WEIGHT 4 1/2" 10.5" used
 CASING DEPTH 2684' KB DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.6 # SLURRY VOL 65 BBL WATER gal/sk 9.0 CEMENT LEFT in CASING 0'
 DISPLACEMENT 42.6 BBL DISPLACEMENT PSI 800 MMR PSI 1200 Bump Plug RATE _____

REMARKS: Safety Meeting: Rig up to 4 1/2 Casing. Break Circulation w/ 10 BBL Fresh water. Mixed 210 sks THICK Set Cement w/ 5" Kol-Seal /sk @ 13.6 #/gal, yield 1.75. Shut down. Wash out Pump & Lines. Release Plug. Displace w/ 42.6 BBL Fresh water @ 5 BPM. FINAL Pumping Pressure 800 PSI. Bump Plug to 1200 PSI. wait 2 minutes. Release Pressure. Float Held. Shut casing in @ 0 PSI. Good Circulation @ ALL times while Cementing. Job Complete. Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	925.00	925.00
5406	40	MILEAGE	3.65	146.00
1126 A	210 sks	THICK Set Cement	17.00	3570.00
1110 A	1050 "	Kol-Seal 5" /sk	.42	441.00
5407 A	11.55 Tons	40 miles BULK TRUCK	1.20	138.60
5502 C	3 Hrs	80 BBL VAC TRUCK #436	100.00	300.00
5502 C	3 Hrs	80 BBL VAC TRUCK #437	100.00	300.00
1123	6000 gals	City water	14.00	84.00
4404	1	4 1/2 Top Rubber Plug	42.00	42.00
4156	1	4 1/2 FV Float Shoe	227.00	227.00
4103	2	4 1/2 Cement Baskets	208.00	416.00
4129	5	4 1/2 x 7 7/8 Centralizers	40.00	200.00
			Sub Total	7209.40
		THANK YOU	5.3%	SALES TAX
				ESTIMATED TOTAL
				7422.50

RECEIVED
KANSAS COMMISSION
FEB 06 2009
CONSERVATION DIVISION
WICHITA, KS

Ravin 3737

THANK YOU
221980

AUTHORIZATION Witnessed by Ed Mann TITLE Partner DATE _____



CONSOLIDATED
Oil Well Services, L.L.C.



ENTERED

TICKET NUMBER 20686

LOCATION EUREKA

FOREMAN Rick Latford

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-487-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-5-08	5500	Manns # 3				Butler
CUSTOMER			3 Rivers Exploration			
MAILING ADDRESS			TRUCK #	DRIVER	TRUCK #	DRIVER
Manns ATP Inc.			463	Shannon		
7865 NW 20th			573	Phillip		
CITY	STATE	ZIP CODE	436	Chris		
Potwin	KS	67123				

JOB TYPE surface HOLE SIZE 12 1/4" HOLE DEPTH 210' CASING SIZE & WEIGHT 8 5/8"
 CASING DEPTH 200' c.c. DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 15" SLURRY VOL 30 Bbl WATER gal/sk 6.5 CEMENT LEFT in CASING 20'
 DISPLACEMENT 11 1/2 Bbl DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting. Rig up to 8 5/8" casing. Break circulation w/ 5 Bbl fresh water. Mixed 2000 lbs class "A" cement w/ 3% cacl2, 270 gal + 1/4" flocc #1 @ 15# #/gal. Displace w/ 11 1/2 Bbl fresh water. shut casing in w/ good cement returns to surface = 7 Bbl slurry to pit. Job complete. Rig down.

Note: Used 20 sks to top off well on Manns # 2

"Thank You"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54013	1	PUMP CHARGE	725.00	725.00
5406	40	MILEAGE	3.65	146.00
11045	125 sks	class "A" cement	13.50	1687.50
1102	300#	3% cacl2	.75	226.50
1118A	235#	270 gal	.17	39.95
1102	30#	1/4" flocc #1/gal	2.10	63.00
5407	5.00	ten-mileage busk tax	n/c	315.00
502C	4 hrs	80 Bbl var. TAX	100.00	400.00
1123	3000 gals	city water	14.00	42.00
11045	20 sks	class "A" cement (topped well off on Manns # 2)	13.50	270.00
			subtotal	3950.95
			SALES TAX	183.35
			ESTIMATED TOTAL	4134.30

Revin 3737

AUTHORIZATION Witnessed by Ed Manns

207 887
TITLE Owner

DATE _____